

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH
WALTER M. DICKIE, M.D., Director



Weekly Bulletin

STATE BOARD OF PUBLIC HEALTH

HOWARD MORROW, M.D., San Francisco, President
GEO. H. KRESS, M.D., Los Angeles
ROY A. TERRY, M.D., Long Beach

EDWARD M. PALLETTE, M.D., Los Angeles, Vice President
GUSTAVE WILSON, M.D., Sacramento
WM. R. P. CLARK, M.D., San Francisco

WALTER M. DICKIE, M.D., Sacramento
Executive Officer

SAN FRANCISCO

State Office Building, McAllister and
Larkin Streets UNDERHILL 8700

SACRAMENTO

State Office Building, 10th and L Streets
Capital 2800

LOS ANGELES

State Office Building, 217 West First
Street MADISON 1271

Entered as second-class matter February 21, 1922, at the post office at Sacramento, California, under the Act of August 24, 1912.
Acceptance for mailing at special rate of postage provided for in Section 1103, Act of October 2, 1917.

Vol. XVII, No. 4

February 19, 1938

GUY P. JONES
EDITOR

Wine Quality Standards Are Enforced

By MILTON P. DUFFY, Chief, Bureau of Food and Drug Inspections, California State Department of Public Health

The enforcement of the California wine quality standards has been, during the past three years, an important responsibility and activity of the Bureau of Food and Drug Inspections of the California State Department of Public Health. The definitions and standards for wines are promulgated under provisions of the California Pure Foods Act. In some respects these standards are the highest in the world.

The effectiveness of enforcement thus far has been demonstrated by a steady improvement in wine quality and by the removal of large quantities of substandard wines from the market in California. While the quality improvement has been a natural development as the industry became reestablished, the work of the Bureau definitely has been a contributing factor.

Results of the enforcement in this State have led to adoption of the California standards by the beverage control authorities in Oregon, Virginia and Arizona, to apply to California wines sold in those states. There now is a growing insistence by producers and distributors of California wine that the Federal Alcohol Administration be asked to amend its regulations to require that any wine labeled with the name of California and sold in any part of the United States be in full conformity with the California standards.

Despite the fact that the bureau's activities have led to the libeling, or quarantining, of hundreds of

thousands of gallons of substandard wine, and have thus resulted in direct dollar losses to many wine producers, the wine makers of California are among the strongest supporters of the enforcement program. They recognize generally that the bureau's work in protecting the public is also beneficial to the great grape and wine industry.

There still is substandard wine to be found in California, but it now constitutes an extremely small percentage of the total production, and this percentage is becoming progressively less. The bureau's inspectors constantly are checking and analyzing wine samples taken at wholesale and retail outlets and at the wineries which supply those outlets. When substandard wines are encountered, they are libeled, or quarantined. If they can be brought up to standard by blending, the producer is permitted to do so. Otherwise, they are diverted for use as distilling stock or are destroyed. The bureau does not allow unsound wines to be blended.

When the bureau first undertook the enforcement of the wine quality standards, approximately two-thirds of the samples submitted to the bureau laboratory by the inspectors were substandard. It should be pointed out, however, that an inspector, now as then, does not sample wines which he is reasonably sure are above standard. Two years ago the bureau estimated that the consumer, unless he exercised un-

usual care in the purchase of an inexpensive wine, stood a better than even chance of receiving an adulterated product. This situation has been largely rectified.

There are a great many causes of wine spoilage. Some of it is due to conditions existing in the process of manufacture, lack of proper equipment or ignorance on the part of the wine maker. Much substandard wine becomes substandard after leaving the winery because of improper handling in transit or because of poor storage conditions in the wholesale or retail premises. Wine may be spoiled by careless handling of bulk dry wines in retail premises during the summer months, by bottling of wines in second-hand bottles which have not been properly cleaned and sterilized, and by adulteration resulting from ignorant blending attempts by distributors trying to squeeze a few cents more profit out of their wine.

Bureau inspectors have been vigilant in determining and eliminating the causes of spoilage and adulteration in each case where substandard wine has been discovered. In the wine industry as in any other large industry there is a certain disreputable minority element, which does business without regard for the quality of the merchandise handled so long as it is disposed of at a profit.

At the beginning of 1937 nearly 700,000 gallons of wine were under label. In the period from January 4th, 1937, through December 31st, 1937, a total of 1,670,324 gallons of wine was labeled. In the same period 825,173 gallons were released for distilling or were destroyed, and 1,306,386 gallons were released for blending. Altogether, 744 citations were issued last year by the bureau for violations of the wine quality standards. In connection with these citations, 685 hearings were held.

The quality regulations which the bureau enforces establish minimum and maximum standards for the chemical composition and purity of various broad classifications of wine, as to alcoholic content, volatile acid and total fixed acid (as tartaric). The classifications include dry red wine, dry white wine, sweet wine, sparkling wine, carbonated wine, and champagne. For example, under the standards, dry red wine must contain not more than .120 grams of volatile acid per 100 cubic centimeters and not less than .400 grams of total fixed acid per 100 cubic centimeters.

The bureau demands honest labeling of wines, both domestic and foreign, sold in California. Wine type names of foreign origin such as Burgundy, Champagne, Port and Sherry must be qualified by the name of the true place of production (as California).

During the past year the bureau has also devoted attention to statements of age on labels. No statement of age or representation relative to age may be made on any wine in containers of more than one gallon. On domestic wine containers of one gallon or less the year of vintage may not be stated unless a sworn statement first has been filed with, and approved by, the California State Board of Public Health. This sworn statement must declare the quantity and year of vintage of such wine in the possession of the maker of the statement, and if purchased from another person, the name of such person and the name of the producer thereof. A wine may not be given a vintage date unless produced entirely from grapes of the vintage of that year. The year of vintage of imported wines may be stated only on those wines bottled before importation into the United States.

Taken as a whole, the results of wine quality enforcement to date are encouraging, but they indicate there still is a need, and probably always will be, for continued diligent enforcement of strict standards for wines in California.

PSITTACOSIS CONTROL

During the month of December, 240 interstate shipments were authorized involving 2700 shell parakeets and 314 larger psittacine birds. Sixty-four aviaries were inspected and 105 shell parakeets were destroyed. During December, 1936, 5087 shell parakeets and 493 larger psittacine birds were shipped interstate. This confirms our observations that there has been a marked decrease in the demand for these birds.

Men used to say society could not exist without the support of a leisure class. Nowadays we look upon leisure, not as the privilege of one class, but the birth-right of every man and woman. Moreover, an automatic effect of our machine age has been to increase leisure. Happiness comes, not from work and rest, but from a proper balance of work, leisure, and rest; rightly understood, therefore, leisure is the time, not for rest but recreation, not for indolence but for free beneficial activity. It helps to keep the door of hope open, enabling us to take advantage of passing opportunity, to grow, and to progress. Character, if we may believe biographers, is formed to a considerable extent in a man's hours of leisure. Whatever his daily job may be, rules and routine make him act in a certain approved way. What is demanded of him is teamwork. It is only after man punches "out" on the time-clock that he is free. Note what he does when he has nothing to do and you can tell what kind of a man he is.

HOSPITAL CONFERENCE PROGRAMS ANNOUNCED

The joint conference of the Association of Western Hospitals and the Western Conference of the Catholic Hospital Association, to be held at the Fairmont Hotel, San Francisco, February 28th to March 3d, will also provide opportunity for meetings of allied sections. Among them are the Public Hospitals Section of which Dr. F. O. Butler, Medical Director of the Sonoma State Home, is chairman, and the Cancer Clinic meeting, Dr. Wm. R. Dorr, Superintendent of Riverside County Hospital, presiding.

The following tentative programs have been announced:

TENTATIVE PROGRAM—PUBLIC HOSPITALS SECTION

Tuesday, March 1, 1938

11 a.m.

Appointment of Nominating Committee.

Appointment of Organization Committee.

Resolution re Clearing Committee, and appointment of committee to report at Wednesday meeting. Wm. R. Dorr, M.D., Medical Director, Riverside County Hospital, Arlington, California.

Post-Graduate course for graduate and student nurses in psychiatric nursing. Margaret H. Smyth, M.D., Medical Director, Stockton State Hospital, Stockton, California. Discussant, Mr. Harry Lutgens, Director of Institutions, State of California.

New legislation affecting institutions in this section. Leo W. Farrell, M.D., Medical Director, Sacramento County Hospital, Sacramento, California.

Study of hours of labor and wages of hospital employees of county hospitals; progress report, Miss Mary Cronen, Department of Social Welfare, State of California.

12.15 p.m.

Luncheon meeting.

What the state is doing on control and treatment of venereal diseases, Malcolm H. Merrill, M.D., Chief, Bureau of Venereal Diseases, State Department of Public Health, California.

Report of the Nominating Committee and Election.

Wednesday, March 2, 1938

11 a.m.

Unfinished business:

A. Report of the Committee on Resolution re Clearing Committee.

B. Discussion of Relationship between Private and Public Hospitals, Mr. A. J. Will, Superintendent, Olive View Sanitarium, Olive View, California.

Admission Policies of the State and County Hospitals, B. W. Black, M.D., Medical Director, Alameda County Institutions, Oakland, California.

Outlook of the counties for the disposition of institutional cases in view of the crowded conditions of the state institutions, E. S. Loiseaux, M.D., San Diego County General Hospital, San Diego.

Alcoholic Colonies for California, J. C. Geiger, M.D., Director of Health, San Francisco.

Epileptic Colonies for California, Robert E. Wyers, M.D., Assistant Medical Director, Pacific Colony, Spadra.

Social Security for County Hospital Employees, H. M. Ginsburg, M. D., Medical Director, Fresno County Hospital, Fresno, California.

Appointment of the 1938 Program Committee.

CANCER CLINIC MEETING, ASSOCIATION OF WESTERN HOSPITALS

San Francisco, March 3, 1938

William R. Dorr, M.D., Superintendent, Riverside County Hospital, Arlington, California, presiding.

Introductory remarks.

Z. E. Bolin, M.D., Mary's Help Hospital, San Francisco Cancer Clinics in Private Hospitals.

Charles A. Dukes, M.D., Oakland, Chairman Cancer Commission, California Medical Association, Highland Hospital, Oakland, California.

Cancer Clinics in Public Hospitals.

Malcolm T. MacEachern, M.D., Chicago, Director of Hospital Activities of the American College of Surgeons, Chicago, Illinois.

The Work of the American College of Surgeons.

J. M. Flude, M.D., Hollywood, Western Representative of the American Society for the Control of Cancer, Hollywood, California.

The Women's Field Army for Cancer Control.

Alson R. Kilgore, M.D., San Francisco, former Secretary, Cancer Commission, California Medical Association.

Cancer Control Today and Outlook for the Future.

General Summary—General Discussion

CHANGES AMONG HEALTH OFFICERS

Dr. R. E. Austin has succeeded Dr. Raymond Spear as city health officer of Coronado.

The city of Banning has transferred the administration of its public health affairs to the Riverside County Health Department, Dr. W. A. Jones, County Health Officer. Mr. Edward Miller has been serving as city health officer of Banning.

Dr. J. W. Crever, Jr., has been appointed health officer of Lassen County to succeed Dr. C. I. Burnett. Dr. Crever resides in Susanville.

The city of Shafter in Kern County has been incorporated recently and Dr. M. W. Pascoe has been appointed city health officer.

Tuberculosis was formerly thought to be hereditary and therefore to run in families. We now know that tuberculosis is inherited so seldom that we can safely ignore the possibility. The reason that it sometimes runs in families is because of the close contact that exists between the person with tuberculosis and the other members of the family when they are living in the same house. Little children, particularly, like to run into the sickroom and play around the bed. They handle the bedding and other things which may have been contaminated by the patient. They frequently put their hands in their mouths, and are very likely to become infected in this way. Extensive studies show that the children in a household where there is a case of open tuberculosis are at least five times as likely to become infected as children who are not so exposed.—Carl R. Howson, M.D., Los Angeles.

MORBIDITY

Complete Reports for Following Diseases for Week Ending
February 12, 1938

Chickenpox

731 cases: Alameda County 6, Alameda 2, Albany 3, Berkeley 15, Livermore 1, Oakland 67, Colusa County 1, Richmond 2, Placerville 2, Fresno County 32, Fresno 3, Imperial County 3, Calexico 10, Kern County 8, Hanford 2, Lassen County 1, Los Angeles County 53, Azusa 14, Beverly Hills 2, Burbank 1, Glendale 13, Hermosa 1, Inglewood 5, Long Beach 18, Los Angeles 81, Pasadena 2, Pomona 2, San Fernando 1, Santa Monica 7, Whittier 1, Signal Hill 4, Bell 6, Gardena 1, Madera County 3, Chowchilla 5, Marin County 1, Mendocino County 1, Merced County 4, Gustine 1, Orange County 6, Fullerton 1, Santa Ana 1, Riverside County 3, Blythe 4, Perris 1, Riverside 1, Sacramento 8, San Bernardino County 1, Redlands 1, San Bernardino 2, San Diego County 3, Coronado 6, San Diego 51, San Francisco 51, San Joaquin County 8, Stockton 5, San Luis Obispo 2, San Mateo County 9, Burlingame 1, Daly City 1, South San Francisco 4, San Carlos 3, Menlo Park 16, Belmont 4, Santa Barbara County 22, Santa Barbara 27, Santa Maria 9, Santa Clara County 1, Palo Alto 3, San Jose 2, Solano County 3, Suisun 1, Stanislaus County 10, Turlock 12, Tehama County 1, Red Bluff 2, Tulare County 24, Exeter 4, Lindsay 6, Porterville 1, Ventura County 15, Santa Paula 3, Ventura 1, Yolo County 3, Yuba County 3.

Diphtheria

32 cases: Oakland 2, San Leandro 1, Colusa County 1, Contra Costa County 2, Richmond 1, Bakersfield 1, Delano 1, Los Angeles County 1, Los Angeles 12, Redondo 1, Bell 1, Orange County 1, Riverside County 2, Sacramento 2, San Diego 2, Tulare County 1.

German Measles

18 cases: Alameda 1, Berkeley 1, Fresno County 1, Los Angeles County 2, Long Beach 2, Los Angeles 4, Pomona 1, South Gate 2, San Diego 1, San Francisco 1, Tulare County 1, Tuolumne County 1.

Influenza

118 cases: Pinole 1, Fresno County 4, Kern County 17, Los Angeles County 2, Beverly Hills 1, Culver City 2, Glendale 2, Los Angeles 31, San Fernando 1, Maywood 1, Gardena 1, Mendocino County 4, Carmel 1, Pacific Grove 1, Napa 1, Nevada City 32, La Habra 2, Riverside County 1, Sacramento 1, San Diego County 1, San Francisco 1, Redwood City 1, Sierra County 5, Lindsay 3, Ventura 1.

Malaria

One case: California.*

Measles

248 cases: Berkeley 1, Oakland 1, Gridley 1, Crescent City 1, Fresno County 3, Sanger 1, Imperial County 1, Imperial 1, Kern County 87, Los Angeles County 2, Beverly Hills 2, Burbank 1, Huntington Park 2, Long Beach 3, Los Angeles 8, Monrovia 1, Pomona 6, Madera County 21, Madera 1, Marin County 1, San Rafael 9, Merced County 5, Orange County 1, Riverside County 8, Hemet 4, Sacramento 1, San Bernardino 1, San Diego 7, San Francisco 3, San Joaquin County 2, Manteca 2, Santa Clara County 1, Turlock 1, Tulare County 11, Exeter 36, Lindsay 2, Porterville 5, Oxnard 4.

Mumps

359 cases: Berkeley 3, Livermore 1, Oakland 71, Contra Costa County 2, Martinez 1, Fresno County 15, Fresno 9, Reedley 1, Sanger 8, Kern County 5, Bakersfield 3, Los Angeles County 26, Burbank 1, Compton 10, El Monte 3, El Segundo 1, Glendale 8, Huntington Park 4, Long Beach 20, Los Angeles 13, Manhattan 1, Pomona 5, Santa Monica 3, Lynwood 1, South Gate 2, Madera County 2, Madera 15, Fort Bragg 8, Orange County 2, Fullerton 1, Santa Ana 1, La Habra 1, Riverside 1, Sacramento 5, Ontario 2, San Diego County 10, National City 2, San Diego 9, San Francisco 18, San Joaquin County 7, Stockton 4, San Mateo 3, Menlo Park 1, Santa Barbara County 3, Santa Barbara 5, Santa Maria 2, Santa Clara County 9, San Jose 1, Santa Cruz County 4, Santa Cruz 2, Sonoma County 2, Stanislaus County 8, Oakdale 4, Turlock 3, Tulare County 1, Lindsay 1, Porterville 3, Yolo County 2.

Pneumonia (Lobar)

84 cases: Oakland 3, Fresno County 6, El Centro 1, Los Angeles County 6, Alhambra 1, Burbank 1, El Monte 1, Glendale 1, Los Angeles 34, Monrovia 1, Pasadena 1, Santa Monica 1, Torrance 1, South Gate 1, Merced County 1, Monterey 1, Napa 1, Santa Ana 1, Riverside County 1, Riverside 2, Sacramento County 2, Sacramento 2, San Bernardino 2, San Diego County 1, San Diego 1, San Francisco 7, San Jose 1, Sonoma County 1, Tulare County 1.

Scarlet Fever

199 cases: Alameda 1, Albany 2, Oakland 5, San Leandro 1, Butte County 1, Gridley 4, Calaveras County 2, Colusa 1, Richmond 1, Fresno County 2, Fresno 1, Kern County 1, Bakersfield 2, Hanford 5, Lassen County 4, Los Angeles County 25, Beverly Hills 1, Burbank 1, Compton 1, Culver City 1, El Segundo 1, Huntington Park 2, Inglewood 1, Los Angeles 32, Montebello 2, Pasadena 2, Redondo 1, Santa Monica 2, Whittier

2, Lynwood 5, South Gate 1, Madera County 2, Merced County 4, Gustine 1, Los Banos 1, Monterey County 5, Orange County 5, Newport Beach 1, Santa Ana 3, Riverside County 1, Hemet 1, Sacramento County 1, North Sacramento 1, San Bernardino 1, Upland 1, San Diego 4, San Francisco 10, San Joaquin County 2, Stockton 3, Tracy 1, San Mateo County 1, Redwood City 1, Santa Barbara County 3, Santa Maria 1, Santa Clara County 1, San Jose 4, Santa Cruz County 1, Santa Cruz 1, Watsonville 1, Sierra County 1, Benicia 1, Vacaville 1, Stanislaus County 4, Turlock 1, Sutter County 2, Red Bluff 1, Tulare County 5, Exeter 2, Tuolumne County 1, Ventura County 1, Yolo County 1, Yuba County 3.

Smallpox

40 cases: Contra Costa County 4, Fresno County 1, Los Angeles County 2, Long Beach 1, Los Angeles 8, Madera County 2, Riverside County 1, San Joaquin County 1, Stockton 8, Stanislaus County 10, Tulare County 2.

Typhoid Fever

7 cases: Oakland 1, Richmond 1, Lake County 1, Long Beach 1, Los Angeles 1, San Francisco 1, California 1.*

Whooping Cough

326 cases: Alameda 5, Albany 1, Berkeley 14, Oakland 20, San Leandro 1, Contra Costa County 12, Martinez 12, Richmond 2, Walnut Creek 2, El Dorado County 1, Fresno County 8, Kingsburg 1, Sanger 2, Kern County 9, Lake County 1, Los Angeles County 9, Compton 1, Huntington Park 1, Long Beach 4, Los Angeles 20, Monrovia 1, San Marino 1, Whittier 2, Torrance 1, Madera County 11, Madera 4, Monterey County 3, Salinas 3, Orange County 5, Seal Beach 2, La Habra 4, Sacramento County 2, Sacramento 18, North Sacramento 2, San Bernardino 4, San Diego County 3, Escondido 3, La Mesa 7, National City 9, San Diego 32, San Francisco 25, San Joaquin County 5, Stockton 7, Daly City 1, San Mateo 2, Santa Barbara County 2, Santa Maria 1, Santa Clara County 3, Los Gatos 8, Palo Alto 3, Santa Cruz County 1, Solano County 12, Fairfield 3, Sonoma County 1, Red Bluff 2, Tulare County 2, Santa Paula 2, Ventura 1, Yolo County 2.

Meningitis (Epidemic)

One case: California 1.*

Dysentery (Bacillary)

11 cases: Fresno County 1, Los Angeles 3, San Francisco 2, Burlingame 1, San Mateo 1, Sonoma County 3.

Pellagra

2 cases: Fresno County 1, Los Angeles 1.

Poliomyelitis

3 cases: Los Angeles 1, Nevada County 2.

Trachoma

5 cases: Fresno County 1, Los Angeles 1, Riverside County 2, Stanislaus County 1.

Encephalitis (Epidemic)

One case: Los Angeles.

Trichinosis

2 cases: North Sacramento 1, Sonoma County 1.

Jaundice (Epidemic)

6 cases: Sonoma County.

Food Poisoning

23 cases: South Gate 7, San Francisco 14, Stockton 2.

Undulant Fever

3 cases: Kern County 1, Los Angeles County 1, San Bernardino 1.

Septic Sore Throat

2 cases: Lake County.

Rabies (Animal)

28 cases: Hanford 3, Los Angeles County 5, Alhambra 1, Burbank 1, Glendale 4, Inglewood 1, Los Angeles 10, Santa Monica 1, Riverside County 1, Santa Clara County 1.

* Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are no chargeable to any one locality.